

Fabricator's PAL Material Receival Form

GS-13 Form 2

FAX to: 573-526-5636 or EMAIL to: PAL@modot.mo.gov For assistance call: 573-751-6735

Fabricator Name:							
FAX Number:			Phone Number:				
The following material has been	received and may be used in	MoDOT work. The mate	erial meets PAL	requirements.			
Material	Brand Name (may not apply)	Manufacturer	Arrival Date	Heat or Batch No.	Quantity & Units	PAL Ident. No. (Entered by MoDOT)	
Name:				For Mol	For MoDOT Use Only:		
Signature:	Response Desired By: ? Email or ? Fax			Authoriz	Authorizing Agent:		
Title:	Date:			Authoriz	Authorized Date:		
Email address:							